



# Department of Fire Services Commonwealth of Massachusetts

## Mobile Facility Application for Marine Fueling Permit (FP-293M)

“Application is hereby made in accordance with the provisions of Chapter 148 of the General Laws and 527 Code of Massachusetts Regulations, for a permit authorizing the “Use, Storage and Handling of Flammable and Combustible Liquids on Waters of the Commonwealth, including requirements for Marine Fueling Facilities, Mobile Marine Fuel Vehicles, Fuel Barges and Fuel Vessels”.

Application for Permit is hereby made in accordance with 527 Code of Massachusetts Regulations (CMR) for the calendar year \_\_\_\_\_ by:

NAME OF BUSINESS: \_\_\_\_\_  
*Full Name of Firm, Corporation, Person*

LOCATION OF BUSINESS \_\_\_\_\_

BUSINESS MAILING ADDRESS \_\_\_\_\_  
*Street Number / P.O. Box*

\_\_\_\_\_ *City/Town* *Zip code*

BUSINESS TELEPHONE \_\_\_\_\_

BUSINESS EMAIL \_\_\_\_\_

NAME OF OWNER \_\_\_\_\_

ADDRESS OF OWNER \_\_\_\_\_ OWNER TELEPHONE \_\_\_\_\_

RESPONSIBLE PARTY OPERATING THIS BUSINESS \_\_\_\_\_

FORMER OWNER IF THIS IS A NEW BUSINESS: \_\_\_\_\_

FORMER MAILING ADDRESS: \_\_\_\_\_  
*Street Number / P.O. Box* *City/Town* *Zip code*

I have read and understand the provisions of 527 Code of Massachusetts Regulations (CMR) related to marine fueling?  
Yes ( ) No ( )

❖ Operation is **YEAR ROUND** ( ) **SEASONAL** ( ), if seasonal include dates of operation \_\_\_\_\_

❖ Operation is **NEW** ( ) **RENEWAL** ( ), if renewal please provide previous year’s **MF Permit #** \_\_\_\_\_

❖ Flammable/Combustible Liquid to be dispensed is: Class I ( ) Class II ( ) Class III ( )

I intend to fuel during the hours of darkness: Yes ( ) No ( )  
If yes, list hours that you intend to fuel during darkness \_\_\_\_\_

I have night lighting: Yes ( ) No ( )

**Mail completed application to: Department of Fire Services • Attn: Licensing Desk**

Department of Fire Services • P.O. Box 1025, 1 State Road, Stow, MA 01775  
978-567-3375 • [www.mass.gov/dfs](http://www.mass.gov/dfs)

FP-293M Rev. 8/20  
Revenue Code 0693

I hereby attest that the following individuals have been designated Fueling Facility Operations Supervisor(s) and are responsible employees who I have trained and consider to be competent in the handling of flammable and combustible liquids and are familiar with and understand the contents of 527 CMR 1.00 related to Marine Fueling, and the operation, mechanics and hazards inherent to the handling of flammable and combustible liquids and the fueling of vessels:

<i>Name</i>	<i>Address</i>	<i>Date of Birth</i>
<i>Name</i>	<i>Address</i>	<i>Date of Birth</i>
<i>Name</i>	<i>Address</i>	<i>Date of Birth</i>

( ) Check here and attach a separate piece of paper labeled "M1" if additional space is required.

**❖ MOBILE FACILITIES – TANK CARGO VEHICLES**

List each tank cargo vehicle:

<i>Year</i>	<i>Make/Vehicle</i>	<i>Identification Number</i>	<i>Registration Number</i>
<i>Year</i>	<i>Make/Vehicle</i>	<i>Identification Number</i>	<i>Registration Number</i>
<i>Year</i>	<i>Make/Vehicle</i>	<i>Identification Number</i>	<i>Registration Number</i>

**You must include a photocopy of the motor vehicle registration certificate (RMV3) for each vehicle listed.**

( ) Check here and attach a separate piece of paper labeled "M2" if additional space is required.

***(A separate application, filing fee and permit is required for each separate city, town or fire district)***

**Approved product transfer (fueling) site(s):**

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( ) Check here and attach a separate piece of paper labeled "M3" if additional space is required.

**(A separate application, filing fee and permit is required for each separate city, town or fire district)** I hereby certify under the penalties of perjury that (1) to the best of my knowledge and belief the above statements and attachments are true and accurate, (2) this application is made upon the express condition that any and all other applicable authorizations necessary have been secured and (3) I have filed all Massachusetts tax returns and paid all Massachusetts taxes required by law.

(Authority: Chapter 62C, s. 49A, MGL as amended by Chapter 233, Acts of 1983).

**Print Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

( ) *Officer of Corporation* ( ) *Owner*

**Social Security or Federal Employee Identification Number of the Business:** \_\_\_\_\_

**Signature of Applicant:** \_\_\_\_\_

**FIRE DEPARTMENT NOTIFICATION AND APPROVAL**

I certify that I have inspected or caused to be inspected the above fueling facility (sites) and found them to be acceptable locations.

I am directing that the following restrictions shall apply:

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( ) Check here and attach a separate piece of paper labeled "M4" if additional space is required.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*Head of Fire Department (or Designee)*

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***Print name of Head of Fire Department or Designee and name of Fire Department***

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**Mail completed application to: Department of Fire Services • Attn: Licensing Desk**

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## **A Guide to the Application for a Marine Fuel Permit for a Mobile Facility**

(527 CMR 1.00 and M.G.L. c. 148)

Secure, read and understand 527 Code of Massachusetts Regulations (CMR) related to Marine Fueling. This regulation is available from the State House Book Store, Public Document Room 116, Boston, MA 02133 (Telephone 617-727-2834), and an *unofficial* copy on the DFS website at [www.mass.gov/dfs](http://www.mass.gov/dfs).

### **Application for a Marine Fueling Permit for a Mobile Facility is made on Fire Prevention Form, FP-293M.**

This application may be obtained on the DFS website at [www.mass.gov/dfs](http://www.mass.gov/dfs). The application may be photocopied, provided that all signatures are originals.

- ❑ **All applicants must read the regulation.**
- ❑ **One application per city, town, or fire district.**
- ❑ **Fire Department Notification and Approval** must be completed and signed by the head of the fire department or his/her designee within the jurisdiction of the fuel transfer. By this signature, the fire department is certifying that they have knowledge of the transfer of fuel, the site is in compliance with the regulation and any local restrictions are included in the terms and conditions of the permit. **All permit applications must be signed by the fire department.**
- ❑ **MOBILE FACILITIES – TANK CARGO VEHICLES** must be completed by those applicants seeking to use a cargo tank vehicle to transfer fuel to a marine craft. In addition, a copy of the Massachusetts Registry of Motor Vehicles registration certificate (**Form RMV 3**) must be attached.
- ❑ **You must submit a separate application for each city, town or fire district in which you wish to conduct refueling.**

For each city, town, or fire district, YOU must forward a completed application, the renewal notice (if applicable), all of the appropriate documents listed above, and a check or money order for **\$100.00** made payable to the Commonwealth of Massachusetts, to the Division of Fire Safety, ATTN: Marine Fueling Permit, P.O. Box 1025, State Road, Stow, MA 01775, on or before the expiration date (December 31 of the year issued).

**All incomplete applications for permits will be returned to the applicant. Any delay in the issuance of a license or permit, due to an incomplete filing, will be the sole responsibility of the applicant, and could result in civil and/or criminal penalties pursuant to 527 CMR 1.00.**